

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ST		
O.I.P.E. CLASSIFIER		16	12-31-98
FORMALITY REVIEW		71622	1-14-99

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	1/21/99
2	4/19/00
3	4/22/00
4	4/22/00
5	4/22/00
6	4/22/00
7	4/22/00
8	4/22/00
9	4/22/00
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50	4/22/00

Claim	Date
Final Original	
51	4/19/00
52	4/19/00
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96	4/19/00
97	4/19/00
98	4/19/00
99	4/19/00
100	4/19/00

Claim	Date
Final Original	
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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